

Please type a plus sign (+) inside this box

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	TI-35797
First Named Inventor or Application Identifier	Christo P. Bojkov, et al.
Title	Sealing and Protecting Integrat d Circuit Bonding Pads
Express Mail Label No.	EV334469414US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Specification [Total Pages 18]

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. Drawing(s) (35 USC d113) [Total Sheets 2]

4. Oath or Declaration unsigned [Total Pages 1]

a. Newly Executed (original or copy)

b. Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 17 completed)

[Note Box 5 below]

i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application,
see 37 CFR §1.63(d)(2) and 1.33(b).

5. Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of
the oath or declaration is supplied under Box 4b, is considered as
being part of the disclosure of the accompanying application and is
hereby incorporated by reference therein.

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP)

of prior application No:

Prior application information: Examiner _____

Group / Art Unit: _____

18. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label**23494**

(Insert Customer No. or Attach bar code label here)

Correspondence address below

NAME			
ADDRESS			
CITY	STATE	TX	ZIP CODE
COUNTRY	TELEPHONE	(972) 917-5653	FAX (972) 917-4418

Name (Print/Type)	Michael K. Skrehot	Registration No. (Attorney/Agent)	36,682
Signature		Date	10-3-03

Barcode Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO
U.S. Patent and Trademark Office
10/678709
03940 100303

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

for FY 2003

Express Mailing Label No.: EV334469414US

TOTAL AMOUNT OF PAYMENT (\$ 896.00)

Complete If Known

Application Number	TBD
Filing Date	Her with
First Named Inventor	Christo P. Bojkov, et al.
Examiner Name	TBD
Group / Art Unit	TBD
Attorney Docket No.	TI-35797

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge to the following Deposit Account, **20-0668**

Deposit Account Number

Deposit Account Name **Texas Instruments Incorporated**

Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment

2. Payment Enclosed: Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	200	Extension of time within second month	
1253	950	2253	460	Extension of time within third month	
1254	1,480	2254	720	Extension of time within fourth month	
1255	2,010	2255	980	Extension of time within fifth month	
1401	330	2401	160	Notice of Appeal	
1402	330	2402	160	Filing a brief in support of an appeal	
1403	290	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	640	Petition to revive - unintentional	
1501	1,280	2501	640	Utility issue fee (or reissue)	
1502	460	2502	230	Design issue fee	
1503	620	2503	310	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1801	770	2801	370	Request for Continued Examination (RCE)	
1806	180	1806	180	Submission of Information Disclosure Stmt.	
8021	40	8021	40	Recording each patent assignment per property (time number of properties)	
1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	740	2801	370	For each additional invention to be examined (37 CFR 1.129(b))	

2. EXTRA CLAIM FEES

Total Claims	27	-20** =	Extra Claims		Fee from below	Fee Paid
			7	x	18	126
Independent Claims	2	-3** =	0	x	86	0
Multiple Dependent					260	

**or number previously paid, if greater; For Reissue, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	42	Independent Claims in excess of 3
1203	280	2203	140	Multiple dependent claims in excess of 3
1204	86	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
				SUBTOTAL (2) (\$126)

Other fee (specify) _____

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) 0

Complete (if applicable)

SUBMITTED BY	Michael K. Skrehot	Reg. Number	36,682
Typed or Printed Name			
Signature		Date	10-3-03
			Deposit Account User ID